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DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

[60Day-13-0009]

Proposed Data Collections Submitted for
Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-7570 and send comments to Ron Otten, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d)

ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

National Disease Surveillance Program (OMB No. 0920-0009 Expiration 4/30/2013)--Extension--National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Formal surveillance of 16 separate reportable diseases has been ongoing to meet the public demand and scientific interest in accurate, consistent, epidemiologic data. These ongoing disease reports include: Creutzfeldt-Jakob Disease (CJD), Cyclosporiasis, Dengue, Hantavirus, Kawasaki Syndrome, Legionellosis, Lyme disease, Malaria, Plague, Q Fever, Reye Syndrome, Tickborne Rickettsial Disease, Trichinosis, Tularemia, Typhoid Fever, and Viral Hepatitis. Case report forms from state and territorial health departments enable CDC to collect demographic, clinical, and laboratory characteristics of cases of these diseases. There are no changes since the last submission.

The purpose of the proposed study is to direct epidemiologic investigations, identify and monitor trends in reemerging infectious diseases or emerging modes of transmission, to search for possible causes or sources of the diseases, and develop guidelines for prevention and treatment. The data collected will also be used to recommend target areas most in need of vaccinations for selected diseases and to determine development of drug resistance. Because of the distinct nature of each of the diseases, the number of cases reported annually is different for each. There is no cost to respondents other than their time.

Form	Type of Respondent	No. of Respondents	No. of responses per respondent	Avg. Burden per response (in hrs)	Total burden hours
CJD	Epidemiologist	20	2	20/60	13
Cyclosporiasis	Epidemiologist	55	10	15/60	138
Dengue	Epidemiologist	55	182	15/60	2503
Hantavirus	Epidemiologist	40	3	20/60	40

Kawasaki Syndrome	Epidemiologist	55	8	15/60	110
Legionellosis	Epidemiologist	23	12	20/60	92
Lyme Disease	Epidemiologist	52	385	10/60	3337
Malaria	Epidemiologist	55	20	15/60	275
Plague	Epidemiologist	11	1	20/60	4
Q Fever	Epidemiologist	55	1	10/60	9
Reye Syndrome	Epidemiologist	50	1	20/60	17
Tick-borne Rickettsia	Epidemiologist	55	18	10/60	165
Trichinosis	Epidemiologist	25	1	20/60	8
Tularemia	Epidemiologist	55	2	20/60	37
Typhoid Fever	Epidemiologist	55	6	20/60	110
Viral hepatitis	Epidemiologist	55	200	25/60	4583
Total					11441

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 the Director Centers for Disease Control and
 Prevention

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